

Department of Environmental Quality  
Office of Land Application Programs  
**APPLICATION FOR LAND APPLICATION SUPERVISOR CERTIFICATION**  
By authority of the Virginia Pollution Abatement Permit Regulation (9VAC25-32),  
this form must be completed and submitted in order to be considered for certification.  
**Please print or type this application.**

<b>Personal Information:</b>		<b>Date:</b>	
NAME (Last, First, Middle Initial):			
HOME MAILING ADDRESS:		HOME PHONE NO. (Include Area Code):	BUSINESS PHONE NO.:
CITY	STATE	ZIP CODE	E-MAIL ADDRESS
Please circle your answer: Are you a certified Virginia Nutrient Management Planner: Y / N Have you ever been convicted of a felony? Y / N If yes, was this felony related in any way to the responsibilities of a certified land applicator? Y / N			

<b>Eligibility Information</b>			
Name of Land Application Company/ Employer:			Other Related Experience/Training and List any applicable out-out-of-state Certifications below:
Address:			
City:	State:	Zip:	
Dates of employment:			
From: _____ (mo. & yr.) To: _____ (mo. & yr.)			
List Education Level achieved:			

<b>INDICATE YOUR FIRST AND SECOND CHOICES FOR THE LISTED TRAINING COURSES</b>	
<div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p style="font-size: small;">I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED ON ALL PAGES, INCLUDING ATTACHMENTS, IS ACCURATE AND COMPLETE. I FULLY UNDERSTAND THAT FALSIFICATION OF THIS APPLICATION MAY RESULT IN DENIAL OR REVOCATION OF CERTIFICATION.</p> <div style="border-top: 1px solid black; margin-top: 20px; display: flex; justify-content: space-between;"> <span>Applicant Signature</span> <span>Date</span> </div> <p><b>Mail this completed application to:</b></p> <p style="margin-left: 40px;"><b>Office of Land Application Programs DEQ – Division of Water Quality P. O. Box 1105 Richmond, VA 23218</b></p>	<p><b>Certification Examination:</b> I plan to attend the training course: Y / N</p> <p>Describe Any Special Training Needs Below:</p> <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>